## **AMENDMENTS TO THE CLAIMS**

3

1. (Cancelled)
2 - 3. (Cancelled)
(Currently amended) A method for diagnosing the risk of myocardial
infarction, comprising the following steps (i) to (iii):
(i) analyzing two or more polymorphisms (1) and (2) selected from the
group consisting of the following (1) to (10) in a nucleic acid sample:
(1) polymorphism at the base number position 1019 of the connexin 37
gene; <u>and</u>
(2) polymorphism at the base number position 863 of the tumor necrosis
<del>factor α gene;</del>
(3) polymorphism at the base number position 242 of the NADH/NADPH
oxidase p22 phox gene;
(4) polymorphism at the base number position 6 of the angiotensinogen
<del>gene:</del>
(5) polymorphism at the base number position 219 of the apolipoprotein E
g <del>ene;</del>
(6) polymorphism at the base number position 994 of the platelet-
activating factor acetylhydrolase gene;
(7) polymorphism at the base number position 482 of the apolipoprotein
<del>C-III gene;</del>
(8) polymorphism at the base number position 1186 of the
thrombospondin 4 gene;
(9) polymorphism at the base number position -819 of the interleukin-10
g <del>ene; and</del>
(10) polymorphism at the base number position 592 of the interleukin-10
g <del>ene;</del>

- (ii) determining, based on the information about <u>said polymorphism</u> which was obtained in the step (i), the genotype of the nucleic acid sample; and
- (iii) assessing, based on the genotype determined, a genetic risk of myocardial infarction.

5-12. (Cancelled)